YEAR

2006

FORM

## **California Exempt Organization Annual Information Return**

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For calend	dar or fiscal year beginnir	ng monthda	ayyear	, and e			day		year		
IMPORTANT: Your number is required.  A Final return? Check applicable box.  Yes No											
California corporation number Federal employer identification number (FEIN)				■ Dissolved Withdrawn Merged/Reorganized (attach explanation)							
<del>.</del>			If a box is checked, enter date ●								
Corporation/Organization name					B Check forms filed this year: State: ☐ 109 ☐ 100 ☐ 100S ☐ 100W						
Corporation/Organization name  Federal:  990  990EZ  990T  990PF  1041  If organization is exempt under R&TC Section 23701d and is											
				<b>⊣</b> •		·				Olic	
						us organization, or is c			_		
Address incl	luding Suite, Room, or PMB	no		_		e General Instruction I			_	п.,	
, tadi oco inioi	idding Callo, Floorii, of Fivid					filing? See General Ins				s ∐No	
City State ZIP Code			_	0	ethod used			3701 (insert I			
,				F Type o	i organi.	Zaulon				etter)	
						LI INC SE	CHOH 4947	(a)(1) t	Tust		
Part I C	omplete Part I unless not	required to file this fo	rm. See General Instruc	tions B and	C.						
	1 Gross sales or receip							1			
							l l	2		+-	
Receipts		2 Gross dues and assessments from members and affiliates								+-	
and			est. Add line 1 through lir		10			3			
Revenues		• .	s less than \$25,000, see		tructio	nn C		4		$\overline{}$	
(Enclose, but		•	· · · · · · · · · · · · · · · · · · ·		5						
do not staple, any payment.)	•		ıssets sold								
,	7 Total costs. Add line	•						7		$\overline{}$	
			e 4					8		$\top$	
Evnonoco	9 Total expenses and d							9			
Corporation/d  Address inclu  City  Part I Co  Receipts and Revenues  (Enclose, but do not staple, any payment.)  Expenses  Filling Fee  15 If exem (2) atte by publ 16 Did the been re 17 Is the 0 If "Yes," 18 Did the If "Yes,"	10 Excess of receipts ov						- F	10			
	11 Filing fee \$10 or \$25.							11			
Filing	12 Penalty for failure to						- 1	12			
	13 Use tax. See "Genera							13		00	
	14 Balance due. Add lin						- F	14			
15 If exem	npt under R&TC Section 23	3701d, has the organiz	ation during the year: (1)	participate	d in an	y political campaig	n or				
(2) atte	empted to influence legisla	tion or any ballot meas	ure, or (3) made an elect	tion under F	&TC S	Section 23704.5 (re	lating to	lobbyi	ing		
by pub	lic charities)? If "Yes," cor	nplete and attach form	FTB 3509, Political or Le	egislative Ac	tivities	by Section 23701	d Organi	zations	s □ Yes	□ No	
<b>16</b> Did the	e organization have any cha	anges in its activities, g	overning instrument, art	icles of inco	rporat	tion, or bylaws that	have no	t			
been re	eported to the Franchise Ta	x Board? If "Yes," com	iplete an explanation and	attach cop	es of r	revised documents			Yes	□ No	
<b>17</b> Is the o	organization exempt under	R&TC Section 23701g	?						□ Yes	□ No	
	," enter amount of gross re										
	e organization file Form 100					?			Yes	□ No	
If "Yes,	," enter amount of total inc	come reported \$				_					
40 TI ('		,				D 11 1		,	,		
19 The fin	ancial records are in care	OT				Daytime t	elepnone	9 (	_)		
located	l at										
1000160	ι αι										
			ned this return, including acc						knowledge and b	elief, it is	
	true, correct, and complete.	Declaration of preparer (c	iner than taxpayer) is based	on all informa	llion or	wnich preparer has ar	iy knowled	ige.			
								•	( )		
	Signature of officer			Date		Title			Daytime telepho	ne	
	Paid			Date		Check if		•	SSN or PTIN		
Paid	Preparer's signature					self-employed $\square$			-		
	6						FEIN				
use Unly	Firm's name (or yours, if	Firm's name (or yours, if self-employed) and address  Daytime telephor									
	sell-employed) and addre							ne (	)		
	1					1					

Part			nizations with gross receipts of more tha				mount of gross rec	eipts -	_	
			plete Part II or furnish substitute informat	<u> </u>						I
			Gross sales or receipts from all business							
			Interest					_		
Rece	ipts		Dividends							
from Other			Gross rents							
Other Source			Gross royalties							
			Gross amount received from sale of asset Other income, Attach schedule							
			<b>Total</b> gross sales or receipts from other s					-		
		0		-				8		Π
-	Enter here and on Side 1, Part I, line 1									
			Disbursements to or for members	•						
		١	Compensation of officers, directors, and t					_		
Expe	nses	11	Other salaries and wages							
and Disbu	Irco-		Interest							
ment			Taxes							
			Rents					_		
			Depreciation and depletion							
			Other. Attach schedule					_		
Cab	edu		Total expenses and disbursements. Add li Balance Sheets						voble voes	
Asse		ie L	. balance Sheets	Beginning (a)	וט נמז			u oi ta	xable year	
				(a)		(b)	(c)		(d)	
			to receivable							
			ts receivable							
			eceivable. Attach schedule							
			Lateta gavernment obligations							
			I state government obligations							
	6 Investments in other bonds. Attach schedule									
	7 Investments in stock. Attach schedule									
	8 Mortgage loans (number of loans)									
	9 Other investments. Attach schedule									
			ble assets				1	١		
			umulated depreciation	(			(			
			ts. Attach schedule							
	otal a		J							
			net worth							
			ayable							
			ns, gifts, or grants payable							
			notes payable. Attach schedule							
			payable							
			ities. Attach schedule							
			ck or principle fund							
			capital surplus. Attach reconciliation							
			arnings or income fund							
			ties and net worth							
Scn	edu	ie n	<b>N-1</b> Reconciliation of income per books  Do not complete this schedule if the			3 column (d) is less	than \$25,000			
_			•	aoan on oonoudio E,						
			e per books		-  <sup>7</sup>	Income recorded on				
			ome tax		-	not included in this				
			capital losses over capital gains		Attach schedule					
			t recorded on books this		8	Deductions in this re	-			
-		ear. Attach schedule against book income this year.								
	Expenses recorded on books this year not Attach schedule									
		ted i	n this return. Attach schedule			Total. Add line 7 and				
6	Total.	al. <b>10</b> Net income per return.								

Subtract line 9 from line 6 . . . . . . . . . . . .